



SUSU CLIENT REGISTRATION

PHOTO(S)

Title

Account No.

Full Legal Name

Residential/ Postal Address

Nearest Landmark

Sex: Male Female Phone No.

Date of Birth / / Place of Birth

Occupation Nationality

Identification Type: Ghana Card Passport ID No.

Issue Date / / Expiry Date / /

Place of Issue Hometown

Marital Status: Single Married Other (Please Specify)

Spouse: Full Name

Spouse Date of Birth / / Occupation

Father's Name

Mother's Maiden Name

NEXT OF KIN: Full Name

Date of Birth / / Phone Number.

Address

Relationship to Applicant

Initial Deposit Source of Funds

Applicant's Signature/ Thumbprint

Agent No. Signature Date / /

Supervisor's Signature Date / /



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NSOATREMAN RURAL BANK PLC

CONFIRMATION OF RECEIPT OF LEAFLET AND VERBAL EXPLANATION ON THE GHANA DEPOSIT PROTECTION SCHEME

I hereby confirm that I have received from Nsoatreman Rural Bank Limited verbal explanation and a leaflet on the deposit protection scheme in Ghana.

(Name of client)

(Name of officer)

(Signature of client)

(Signature of officer)

(Date)



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